POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	96		8-39.01
O.I.P.E. CLASSIFIER	49-	32-	9/14
FORMALITY REVIEW	KC	1080	10-2-01
RESPONSE FORMALITY REVIEW	AM	917	01-14-06

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Rejected	N Non-elected
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— (Through numeral) Canceled	A Appeal
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Claim Date	Claim Date	Claim Date	
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